



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Johnson, et al.

Serial No.: 10/615,077

Filed: July 8, 2003

*jeff mly*  
Group Art Unit: 2824

Examiner: Nguyen, Dang

Docket No. 10017415-1

For: System and Method for Erasing High-Density Non-Volatile Fast Memory

**FIRST RESPONSE**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

The Office Action mailed July 27, 2004 has been carefully considered. In response thereto, please enter the following amendments and consider the following remarks.

**AUTHORIZATION TO DEBIT ACCOUNT**

It is not believed that extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 08-2025.

09/28/2004 MAHMED1 00000044 082025 10615077

01 FC:1252 420.00 DA

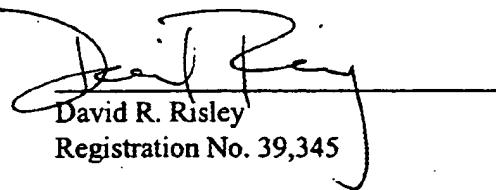
Adjustment Date: 10/18/2004 PBRITTON 10615077  
09/28/2004 MAHMED1 00000044-082025 10615077  
01 FC:1252 420.00 CR

10/18/2004 PBRITTON 000000005 082025  
01 FC:1201 258.00 DA  
02 FC:1202 162.00 DA

CONCLUSION

Applicant respectfully submits that Applicant's pending claims are in condition for allowance. Favorable reconsideration and allowance of the present application and all pending claims are hereby courteously requested. If, in the opinion of the Examiner, a telephonic conference would expedite the examination of this matter, the Examiner is invited to call the undersigned attorney at (770) 933-9500.

Respectfully submitted,



\_\_\_\_\_  
David R. Risley  
Registration No. 39,345

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to: Assistant Commissioner for Patents, Alexandria, Virginia 22313-1450, on

9-23-04

Mary M. Egan  
Signature

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10017415-1

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	35	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	35 minus 20=	15
INDEPENDENT CLAIMS	8 minus 3 =	5
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

9/27/04 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 44	Minus	** 35 = 9
Independent	* 11	Minus	*** 8	= 3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

RATE	Fee	RATE	Fee
BASIC FEE	375.00	OR BASIC FEE	750.00
X\$ 9=		OR X\$18=	270
X42=		OR X84=	420
+140=		OR +280=	
TOTAL		OR TOTAL	1440

OTHER THAN  
SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	162
X42=		OR X84=	258
+140=		OR +280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	420

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X42=		OR X84=	
+140=		OR +280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.